Preserve Safe Care for Veterans
Protect Physician-led Anesthesia Care in VA

Change to VA Policy for Surgical Anesthesia Puts Lives of Veterans at Risk

The U.S. Department of Veterans Affairs, Office of Nursing Services (ONS) and its allies have launched a new effort to eliminate anesthesiologists from the team-based model of Veterans’ care and to move to a nurse-only model of care for both surgery and critical care services. The effort, centered around a senior VA staff memorandum, the “Stone Memo,” authored by acting Under Secretary for Health, Richard Stone, MD, would undo a longstanding VA patient safety policy, affirmed in 2017, that provides for anesthesiologist-delivered or anesthesiologist-led team-based care for Veterans.

This abrupt change in VA policy completely disregards a federal rulemaking process through which VA granted other advanced practice nurses the ability to practice in nurse-only models, but recognized the surgical setting is distinct, explicitly carving out and excluding nurse anesthetists. In 2017, after four years of study and consideration by VA, and two public comment periods with a record level of engagement by Veterans and their families, including over 200,000 comments, VA maintained safe, high-quality, team-based anesthesia care in VA surgical facilities. The “Stone Memo” policy change also disregards this, as well as the National Anesthesia Directive 1123, which was implemented in October 2019 following the rulemaking process to memorialize the team-based model of anesthesia care.

With 12 to 14 years of education and 14,000 to 16,000 hours of clinical training, anesthesiologists are the most highly trained and skilled anesthesia professionals and serve a critical role in providing safe anesthesia care. Removing highly-trained anesthesiologists from the care of Veterans lowers the standard of care in VA facilities and puts the lives of more than 9 million Veterans at risk.

VA patients generally have poorer health status than the general population. Access to highly educated and skilled anesthesiologists in VA patient care is critical in providing better outcomes. Many Veterans suffer from underlying health conditions such as heart disease, diabetes and high blood pressure, all of which increase patient risk around the surgical experience. Additional risks have been identified for Veterans suffering from health conditions related to exposure to Burn Pits and Agent Orange, including serious respiratory diseases, Parkinson's Disease and certain cancers. Without physician involvement, VA would be lowering the standard of care for Veterans and putting their health and lives unnecessarily at risk.

Key Points:

- ASA opposes any weakening of protections that ensure patients have access to the proven, safe, physician-led model of anesthesia care.
- This policy change unnecessarily threatens the safe, high-quality care delivered to our Veterans, lowering the standard of care for those receiving anesthesia care in VA facilities.
- VA patients have complex medical conditions that pose a heightened risk of complications during surgery creating a patient safety imperative to ensure the involvement of a physician anesthesiologist.
- The Stone memo disregards the National Anesthesia Directive 1123, which was implemented in October 2019 following extensive VA negotiations to memorialize the results of the rulemaking process—a team-based model of anesthesia care.

REQUEST:

Send a letter urging VA leadership to immediately rescind their memo and affirm VA’s safety standard of physician anesthesiologists and nurse anesthetists working together in the team-based model of anesthesia care.